

**APPLICATION FOR THE 2000-01
BEGINNING-TEACHER MINIMUM SALARY PROGRAM,
EDUCATION CODE SECTION 45023.1**

County/District Code:

County Name: _____

District Name: _____

Contact Person: _____

Telephone: () _____

- A. This school district or county office of education elects to participate in the 2000-01 Beginning-Teacher Salary Program and will implement a salary schedule for the 2000-01 fiscal year that provides an annual salary of at least \$34,000 for all teachers meeting the following criteria: a) hold a valid California teaching credential, not including an emergency permit, intern permit, or waiver; b) possess a baccalaureate or higher degree; and c) receive a salary paid through the general fund of the district or county office of education.
- B. This school district or county office of education elects to receive its funding for the 2000-01 Beginning-Teacher Minimum Salary Program pursuant to one of the following two options:

Check one:

1. _____ **Option One.** (This option is available to all participants including those participants with minimum annual teacher salaries already at or above \$34,000.) For 2000-01 this option will provide funding equal to \$6 multiplied by the school district's or county office's 1999-00 second period average daily attendance, excluding attendance in adult education programs and charter schools participating in the charter school funding model.
2. _____ **Option Two.** (This option is available to program participants that prior to participation in the 2000-01 Beginning-Teacher Minimum Salary Program had a 2000-01 annual minimum teacher salary less than \$34,000.) This option will provide funding equal to the difference between teacher salaries on the 2000-01 salary schedule before and after the increase in salary pursuant to the 2000-01 Beginning-Teacher Minimum Salary Program, adjusted by the school district's or county office's statutory benefit rate.

Note: Funding received pursuant to either option is subject to deficit in the event that the program appropriation is insufficient to cover claims.

Signature, District or County Superintendent

Date

**Return by December 31, 2000 to: California Department of Education
School Fiscal Services Division
560 J Street, Suite 150
Sacramento, CA 95814**

Attn: Rich Zeiszler